

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Request 69	925 573	01-02-01
RESPONSE FORMALITY REVIEW			02-12-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	07/27/01
2	✓
3	✓
4	✓
5	✓
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50	✓

Claim	Date
Final	Original
51	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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